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|---|--|--|---|------------------|---|-------------------------|---|----------|--|--------------------------------|--|----------|------------------------------|---|--|--|
| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) | | Docket Number (Optional) VOSSM-0002 | | | | | | | | | | | | | | |
| <table border="1" style="width: 100%; border-collapse: collapse;"><tr><td colspan="2" style="padding: 2px;">In re Application of Steffen GOLETZ et al.</td></tr><tr><td style="padding: 2px;">Application Number 10/536,834</td><td style="padding: 2px;">Filed March 20, 2006</td></tr><tr><td colspan="2" style="padding: 2px;">For TUMOR-SPECIFIC RECOGNITION MOLECULES</td></tr><tr><td style="padding: 2px;">Group Art Unit 1643</td><td style="padding: 2px;">Examiner David J. Blanchard</td></tr></table> | | | In re Application of Steffen GOLETZ et al. | | Application Number 10/536,834 | Filed March 20, 2006 | For TUMOR-SPECIFIC RECOGNITION MOLECULES | | Group Art Unit 1643 | Examiner David J. Blanchard | | | | | | |
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| For TUMOR-SPECIFIC RECOGNITION MOLECULES | | | | | | | | | | | | | | | | |
| Group Art Unit 1643 | Examiner David J. Blanchard | | | | | | | | | | | | | | | |
| <p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <table style="width: 100%;"><tr><td><input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))</td><td style="text-align: right;">\$<u>120.00</u></td></tr><tr><td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td><td style="text-align: right;">\$ _____</td></tr><tr><td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td><td style="text-align: right;">\$ _____</td></tr><tr><td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td><td style="text-align: right;">\$ _____</td></tr><tr><td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td><td style="text-align: right;">\$ _____</td></tr></table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ ____.</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input checked="" type="checkbox"/> Payment by credit card via EFS.</p> <p><input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>13-3402</u>.</p> <p>I have enclosed a duplicate copy of this sheet.</p> <p>I am the <input type="checkbox"/> applicant/inventor.</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71</p> <p style="padding-left: 40px;">Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p><input checked="" type="checkbox"/> attorney or agent of record.</p> <p><input type="checkbox"/> attorney or agent under 37 CFR 1.34(a).</p> <p style="padding-left: 40px;">Registration number if acting under 37 CFR 1.34(a). _____.</p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <table style="width: 100%; margin-top: 20px;"><tr><td style="width: 50%; text-align: center; vertical-align: bottom;"><u>July 29, 2008</u> Date</td><td style="width: 50%; text-align: center; vertical-align: bottom;"><u>/Anthony J. Zelano/</u> Signature</td></tr><tr><td></td><td style="text-align: center; vertical-align: bottom;"><u>Anthony J. Zelano, Reg. No. 27,969</u> Typed or printed name</td></tr></table> <p style="font-size: small; margin-top: 10px;">NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.</p> <p><input type="checkbox"/> *Total of _____ forms are submitted.</p> | | | <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$ <u>120.00</u> | <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$ _____ | <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$ _____ | <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$ _____ | <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$ _____ | <u>July 29, 2008</u> Date | <u>/Anthony J. Zelano/</u> Signature | | <u>Anthony J. Zelano, Reg. No. 27,969</u> Typed or printed name |
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